SERIAL NO. MULTIPLE DEPENDENT CLAIM FILING DATE FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875) **CLAIMS** AFTER AFTER AFTER AFTER AS FILED AS FILED 1" AMENDMENT 2 AMENDMENT 1"AMENDMENT 2 MENDMENT IND. DEP. IND. DEP. IND. DEP. DEP. IND. IND. DEP. IND. DEP. TOTAL TOTAL IND. IND. TOTAL TOTAL DEP. DEP. TOTAL CLAIMS CLAIMS U.S. DEPARTMENT of COMMERCE

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